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amended by any amendment specifically referred to above.

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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	DECLADATION FOR UTILITY OR	Attorney Docket Number							
	DECLARATION FOR UTILITY OR DESIGN	First Named Inventor							
	PATENT APPLICATION	COMPLETE IF KNOWN							
	(37 CFR 1.63)	Application Number							
	☑ Declaration ☐ Declaration	Filing Date							
	Submitted OR Submitted after Initial	Group Art Unit							
	with Initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)	Examiner Name							
	As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
	HANDHELD ERGONOMIC MOUSE								
(Title of the Invention)									

☑ is attached hereto		
OR		as United States Application Number or PCT Internationa
was filed on (MM/DD/YYYY)		(if applicable)
Application Number	and was amended o	on (MM/DD/YYYY)
hereby state that I have reviewed and und	derstand the contents of	f the above identified specification, including the claims, as

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	opy Attached? NO	
			000			
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s) Filing Dat		e (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet			
60/185,860	02	02/29/2000		PTO/SB/02B attached hereto.		

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Appendix Ap

DECLARATION — Utility or Design Patent Application

Direct all corre	espandence to a la la	Customer Nu or Bar Code I	I			OR X C	Correspondence address below
Name	Name JIONG JOHN JIANG						
Address	1320 Stonegate Road	d					
Address							
City	Algonquin				State	ΙL	ZIP 60102
Country	USA		Telephon		/-45878]	10	Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF S	OLE OR FIRST INV	/ENTOR :			A petiti	ion has been file	ed for this unsigned inventor
Given Name (first and middl	le [if aˈny]) JIONG	JOHN			Family or Surn		ЛANG
Inventor's Signature	Inventor's / / / / / / / / / / / / / / / / / / /						
Residence: Cit	y Algon	quin		State	IL	Country USA	Citizenship CANADIAN
Mailing Addres	is 1320 (Stonegate R	₹oad				
Mailing Addres	ss						
City	Algonquin	State	IL		ZIP_	60102	USA
NAME OF SI	NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middl	Given Name (first and middle [if any]) Family Name or Surname						
Inventor's Signature							
Residence: Cit	у			State		Country	Citizenship
Mailing Addres	Mailing Address						
Mailing Address							
City		State			ZIP		Country
☐ Additional in	nventors are being named	d on the	_suppleme	ntal Additio	nal Inver	ntor(s) sheet(s) PTC	D/SB/02A attached hereto.

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2-13-2001